

2681


**TRANSMITTAL  
FORM**

(This form may be used for all correspondence after initial filing)

Total Number of Pages in this Submission

26

Application Number 09/824,378

Filing Date 04/02/2001

First Named Inventor Chaker T. Al Hakim et al.

Group Art Unit 2681

Examiner Name Kizou, Hassan

Attorney Docket Number 2000-0567

**Enclosures (check all that apply)**

- Fee Transmittal Form  
 Fee Attached  
 Amendment / Response  
 After Final  
 Affidavits / Declaration(s)  
 Extension of Time Request  
 Express Abandonment Request  
 Information Disclosure Statement  
 Certified Copy of Priority Document(s)  
 Response to Missing Parts under 37 CFR 1.52 or 1.53  
 Response to Missing Parts/Incomplete Application

- Assignment & Recordation Cover Sheet  
 Drawing(s) & Letter to Official Draftsman  
 Licensing-related Papers  
 Petition to the Commissioner  
 Petition to Convert a Provisional Application  
 Power of Attorney, Revocation Change of Correspondence Address  
 Terminal Disclaimer  
 Request for Refund

- After Allowance Communication to Group  
 Appeal Communications to Board of Appeals and Interferences  
 Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)  
 Proprietary Information  
 Status Letter  
 Return Receipt Postcard  
 CD, Number of CDs  
 Additional enclosure(s) (please identify below)

New Declaration &amp; Assoc. Docs.

**RECEIVED**

APR 19 2004

Technology Center 2600

Remarks In response to Office Communication of July 18, 2003

**CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label

Customer Number - 26652

or  Correspondence address below

NAME	Samuel H. Dworetzky			
ADDRESS	AT&T CORP. P.O. Box 4110			
CITY	Middletown	STATE	New Jersey	ZIP CODE
COUNTRY	United States of America			

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Robert T. Canavan	Reg. #	37592
TELEPHONE	908-707-1568		
SIGNATURE		DATE	04/09/2004

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 04/09/2004

Type or Printed Name	Robert T. Canavan		
Signature		Date	04/09/2004

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**FEE TRANSMITTAL**

Patent Fees are subject to annual revision.

TOTAL AMOUNT  
OF PAYMENT

170

		Complete If Known	
Application Number	09/824,378		O P E R
Filing Date	04/02/2001		APR 12 2004
First Named Inventor	Chaker T. Al Hakim		RECEIVED U.S. PATENT AND TRADEMARK OFFICE
Examiner Name	Kizou, Hassan		TELECO
Group/Art Unit	2681		TELECO
Attorney Docket No.	2000-0567		TELECO

**METHOD OF PAYMENT** (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745

Deposit Account Name AT&amp;T CORP.

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance
**FEE CALCULATION****1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1001	770	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
1002	340	Design Filing Fee	
1004	770	Reissue Filing Fee	
1005	160	Provisional Filing Fee	

**SUBTOTAL (1)****2. CLAIMS**

- Filing Under 37CFR 1.53 (b)  
 CPA Under 37CFR 1.53 (d)  
 Amendment

Extra Claims	Fee from below	Fee Paid
Total 12 - 20 = 0	x 18 = 0	= 0
Ind. 2 - 3 = 0	x 86 = 0	= 0

## Multiple Dependent Claims

Large Fee Code	Entity Fee(\$)	Fee Description
1202	18	Claims in excess of 20
1201	88	Independent Claims in excess of 3
1203	290	Multiple Dependent Claims
1204	88	** Reissue Independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

\*\* or number previously paid, if greater; for Reissues, see above

**SUBTOTAL (2)****SUBTOTAL(3)** 170Complete (if applicable)  
Reg. Number**SUBMITTED BY**

Typed or Printed Name

John E. Etchells

Signature

*John E. Etchells*

Date

4/9/04

Deposit Account User ID

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



**IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE**

**Applicant(s):** Chaker T. Al Hakim et al.  
**Attorney Docket** 2000-0567  
**No.:**  
**Application No.:** 09/824,378  
**Filing Date:** 04/02/2001  
**Examiner Name:** Kizou, Hassan  
**Group Art Unit:** 2681  
**Title:** Technique for Providing Intelligent Features for Calls in a Communication Network Independent of Network Architecture

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

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Sir:

**RESPONSE**

**INTRODUCTORY COMMENTS**

This is in response to the Office Communication mailed July 18, 2003, regarding the above-identified application. No date was set for a response. Enclosed herewith is a Fee Transmittal for charging the appropriate fees as outlined below. Should additional fees be due under 37 C.F.R. §§ 1.16, 1.17 or 1.21, the Commissioner is hereby authorized to charge payment of those additional fees associated with this communication or credit any overpayment to Deposit Account No. 01-2745.

**Remarks begin on page 2 of this paper.**